Gp 3713

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:		Alcorn et al.	IPE	Atty Docke	et: 38184-0026US			
Serial 1	No:	08/981,882			rch 10, 1998			
Group	Unit	3713 (JA	N 1 8 20	Examiner:	M. O'Neill			
Title:	: "ELECTRONIC CASINO GOMING SYSTEM WITH IMPROVED PLAY CAPACITY, AUTHENTICATION AND SECURITY"							
Assista	ant Com	E AMENDMENT nmissioner for Pat D.C. 20231	ents		: .			
		SUPPLEM	ENTA	L AMENDMEN	TT TRANSMITTAL			
1.	Transm	itted herewith is a	supplem	ental amendment t	for this application.	=		
				STATUS		ECH		
2.	Applica ⊠	ant is a small entity ve □ attached. ☑ already fil other than a small	ed.	atement:	•	TECHNOLOGY CENTER 3700	JAN 21 2000	RECEIVED
			EX	TENSION OF 7	TIME	370		
3. months	(a) checked		s for an	extension of time 1	under 37 CFR 1.136 for the t		ımber	of
		Extension (months)		ee for other than	Fee for small entity			
	_ _ _	one month two months three months four months	\$	110.00 400.00 950.00 ,510.00	\$ 55.00 \$200.00 \$475.00 \$755.00			• .
	If an ad	lditional extension o	of time i	s required please c	onsider this a petition therefore	or.		
		An extension for _ therefor of \$_ extension now req		months h	as already been secured and om the total fee due for the to			
					Extension fee due wit	h this	reque	st \$0
Postal Se	rvice on Ja	t this paper (along with	any referr ufficient p	ostage as first class ma	or enclosed) is being deposited with all in an envelope addressed to the:	th the U	Jnited S	States

(b) Applicant believes that no extension of time is required. However, this conditional petition is hereby made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee		Rate	Addit. Fee
Total *	Minus **		=	x11=	\$		x22=	\$
Indep. *	Minus ***	****	=	x40=	\$		x80=	\$
☐ FIRST	PRESENTATION OF MULT	TPLE DEP. CLA	IM	+130=	\$		x260=	\$
				TOTAL ADDIT . FEE	\$	OR	TOTAL ADDIT. FEE	\$

(c)	X	No additional fee for claims required.
/ 1\		Tr. 4.1 112 10 0 11

FEE PAYMENT

5. ☐ Attached is a check in the sum of \$0
☐ Charge Account No. 02-3964 the sum of \$______
A duplicate of this transmittal is attached.

FEE DEFICIENCY

In the event that: a) no check to cover the filing fee is enclosed, b) any abovereferenced check is inadvertently omitted or lost, or c) any enclosed check is in an
amount less than or greater than the required fee, the Commissioner is authorized to
charge any required fees, additional fees, or credit any overpayment to Deposit Account
02-3964. A duplicate of this authorization is enclosed for that purpose.

Date: January 10, 2000

Claude A.S. Hamrick

Reg. No. 22,586

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Attorney Docket: 38184-0026